2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008519

Entity Name: ELAINE AND PHILIP BLOOM FAMILY SUPPORTING

FOUNDATION, INC.

Current Principal Place of Business:

4200 BISCAYNE BOULEVARD MIAMI, FL 33137

Current Mailing Address:

4200 BISCAYNE BOULEVARD MIAMI, FL 33137

FEI Number: 65-1065543

Name and Address of Current Registered Agent:

LANDE, STEPHEN C 4200 BISCAYNE BOULEVARD MIAMI, FL 33137 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Feb 26, 2014

Secretary of State

CC6664662520

Certificate of Status Desired: Yes

Officer/Director Detail:

Title D Title D

Name LOWY, RONALD S Name BERGER, HELENE

Address 2480 NE 200TH STREET Address 3 GROVE ISLE DRIVE #801

City-State-Zip: MIAMI FL 33180 City-State-Zip: COCONUT GROVE FL 33133

Title D Title DS

Name GERSON, GARY Name LANDE, STEPHEN C

Address 666 71ST STREET Address 4200 BISCAYNE BOULEVARD

City-State-Zip: MIAMI BEACH FL 34314 City-State-Zip: MIAMI FL 33137

Title D Title D

Name SOLOMON, JACOB Name BLOOM, ELAINE

Address 4200 BISCAYNE BOULEVARD Address 5255 COLLINS AVENUE #3-J

City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI BEACH FL 33140

Title D Title D

Name ISRAEL, ANN BLOOM Name BLOOM, DAVID

Address 1484 SW 97TH WAY Address 630 NE 55TH STREET

City-State-Zip: DAVIE FL 33324 City-State-Zip: MIAMI FL 33137

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN C. LANDE

FOUNDATION DIRECTOR

02/26/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Name BLOOM, PHILLIP

5255 COLLINS AVE. APT. 3J Address

City-State-Zip: MIAMI BEACH FL 33140